PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10826089

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
TOTAL CLAIMS			(Column 1)		(Colu	(Column 2)		TYPE		OR	SMALL	ENTITY
TOTAL CLAIMS			28					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			28 minus 20= 1		* §			X\$ 9=		OR	X\$18=	144.00
INDEPENDENT CLAIMS			/ mi	nus 3 =	* 9	<i>*</i>		X43=		OR	X86=	
ML	ILTIPLE DEPEN	NDENT CLAIM PI	RESENT					+145=		OR	+290=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2					TOTAL		OR	TOTAL	914,20
CLAIMS AS AMENDED - PART II										•	OTHER	THAN
		(Column 1)	(Column 2)			(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	CI A114	-		X43=		OR	X86=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
										OR	TOTAL ADDIT. FEE	
ADDIT. FEE											AUDII. FEEI	
_		CLAIMS		HIGHE	ST		П		ADDI-	1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	strat		=		X\$ 9=		OR	X\$18=	
ME	Independent	•	Minus	***		= .	I	X43=		OR	X86=	
۷	FIRST PRESE	ENDENT	CLAIM		▎┟			UH				
								+145=		OR	+290=	•
		A	TOTAL DDIT, FEE		OR	TOTAL ADDIT. FEE						
(Column 1) (Column 2) (Column 3)												·
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		O.D.	X86=	
7	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
4. If the enter in column 4 in least the other in column 5.								+145=		OR	+290=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR	TOTAL ADDIT, FEE	
		mber Previously Paid hber Previously Paid						DDIT. FEE L nd in the app	ropriate box			